

Recipient Committee Campaign Statement

(Government Code Sections 84200-84216.5)

Type or print in ink.

Date Stamp

CALIFORNIA
2001/02
FORM

COVER PAGE
460

Page 1 of 33

For Official Use Only

Statement covers period

from 04/01/2010

through 06/30/2010

Date of election if applicable:
(Month, Day, Year)

SEE INSTRUCTIONS ON REVERSE

1. Type of Recipient Committee: All Committees - Complete Parts 1,2,3, and 4.

- ☐ Officeholder, Candidate Controlled Committee
☐ State Candidate Election Committee
☐ Recall

(Also Complete Part 5.)

- ☐ General Purpose Committee
☐ Sponsored
☐ Small Contributor Committee
☐ Political Party/Central Committee

- ☒ Ballot Measure Committee
☒ Primary Formed
☐ Controlled
☒ Sponsored

(Also Complete Part 6.)

- ☐ Primary Formed Candidate/
Officeholder Committee
(Also Complete Part 7.)

2. Type of Statement:

- ☐ Pre-election Statement
☒ Semi-annual Statement
☐ Termination Statement
☐ Amendment (Explain below)

- ☐ Quarterly Statement
☐ Special Odd-Year Report
☐ Supplemental Preelection
Statement - Attach Form 495

3. Committee Information

I.D. NUMBER
1320515

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
REPAIR CALIFORNIA SPONSORED BY THE BAY AREA COUNCIL

STREET ADDRESS (NO P.O. BOX)

CITY	STATE	ZIP CODE	AREA CODE/PHONE
SAN FRANCISCO	CA	94104	(415)732-7700

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

CITY	STATE	ZIP CODE	AREA CODE/PHONE
SAN FRANCISCO	CA	94108	

OPTIONAL: FAX/E-MAIL ADDRESS
415/732-7701

Treasurer(s)

NAME OF TREASURER
JAMES SUTTON

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
SAN FRANCISCO	CA	94108	415/732-7700

NAME OF ASSISTANT TREASURER, IF ANY
JESSE MAINARDI

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
SAN FRANCISCO	CA	94108	415/732-7700

OPTIONAL: FAX/E-MAIL ADDRESS

4. Verification

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 07/23/2010 By JAMES R. SUTTON
DATE SIGNATURE OF TREASURER OR ASSISTANT TREASURER

Executed on _____ By _____
DATE SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT OR RESPONSIBLE OFFICER OF SPONSOR

Executed on _____ By _____
DATE SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

Executed on _____ By _____
DATE SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC
State of California

Recipient Committee Campaign Statement Cover Page – Part 2

Type or print in ink.

COVER PAGE - PART 2

CALIFORNIA
FORM **460**

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5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP

Related Committees Not Included in this Statement: List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or to make expenditures on behalf of your candidacy.

COMMITTEE NAME	I.D. NUMBER
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NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO
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COMMITTEE ADDRESS STREET ADDRESS (NO P.O.BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

COMMITTEE NAME	I.D. NUMBER
----------------	-------------

NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO
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COMMITTEE ADDRESS STREET ADDRESS (NO P.O.BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

6. Ballot Measure Committee



NAME OF BALLOT MEASURE

CITIZENS' CONSTITUTIONAL CONVENTION ACT; THE CALL FOR A CITIZENS' LIMITED

BALLOT NO. OR LETTER

JURISDICTION

TBD

STATEWIDE

☒ SUPPORT
☐ OPPOSE

Identify the controlling officeholder, candidate, or state measure proponent, if any.

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

OFFICE SOUGHT OR HELD

DISTRICT NO. IF ANY

7. Primarily Formed Committee

List names of officeholder(s) or candidate(s) for which this committee is primarily formed.

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE

Attach continuation sheets if necessary

Campaign Disclosure Statement Summary Page

Type or print in ink.
Amounts may be rounded
to whole dollars.

SUMMARY PAGE

Statement covers period from 04/01/2010 through 06/30/2010	CALIFORNIA FORM 460 Page 3 of 33 I.D. NUMBER 1320515
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

REPAIR CALIFORNIA SPONSORED BY THE BAY AREA COUNCIL

Contributions Received

		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions	Schedule A, Line 3	\$50,000.00	\$234,655.33
2. Loans Received	Schedule B, Line 7	\$0.00	\$0.00
3. SUBTOTAL CASH CONTRIBUTIONS	Add Lines 1 + 2	\$50,000.00	\$234,655.33
4. Nonmonetary Contributions	Schedule C, Line 3	\$0.00	\$0.00
5. TOTAL CONTRIBUTIONS RECEIVED	Add Lines 3 + 4	\$50,000.00	\$234,655.33

Calendar Year Summary for Candidates Running in Both the State Primary and General Elections

	1/1 through 6/30	7/1 to Date
20. Contribution Received	\$0.00	\$0.00
21. Expenditures Made	\$0.00	\$0.00

Expenditures Made

6. Payments Made	Schedule E, Line 4	\$70,966.48	\$440,560.15
7. Loans Made	Schedule H, Line 7	\$0.00	\$0.00
8. SUBTOTAL CASH PAYMENTS	Add Lines 6 + 7	\$70,966.48	\$440,560.15
9. Accrued Expenses (Unpaid Bills)	Schedule F, Line 3	(\$61,305.92)	\$277,074.29
10. Nonmonetary Adjustment	Schedule C, Line 3	\$0.00	\$0.00
11. TOTAL EXPENDITURES MADE	Add Lines 8 + 9 + 10	\$9,660.56	\$717,634.44

Expenditure Limit Summary for State Candidates

22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)

Date of Election (mm/dd/yy)	Total to Date
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Current Cash Statement

12. Beginning Cash Balance	Previous Summary Page, Line 16	\$33,859.34	To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).
13. Cash Receipts	Column A, Line 3 above	\$50,000.00	
14. Miscellaneous Increases to Cash	Schedule I, Line 4	\$0.00	
15. Cash Payments	Column A, Line 8 above	\$70,966.48	
16. ENDING CASH BALANCE	Add Lines 12 + 13 + 14, then subtract Line 15	\$12,892.86	
If this is a termination statement, Line 16 must be zero.			

17. LOAN GUARANTEES RECEIVED..... Schedule B, Part 2 \$0.00

Cash Equivalents and Outstanding Debts

18. Cash Equivalents	See instructions on reverse	\$0.00
19. Outstanding Debts	Add Line 2 + Line 9 in Column B above	\$277,074.29

*Since January 1, 2001. Amounts in this section may be different from amounts reported in Column B.

Schedule A

Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A

Statement covers period		CALIFORNIA FORM 460
from	04/01/2010	
through	06/30/2010	Page 4 of 33
NAME OF FILER REPAIR CALIFORNIA SPONSORED BY THE BAY AREA COUNCIL		I.D. Number 1320515

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
5/18/2010	BAY AREA COUNCIL POLITICAL ACTION COMMITTEE SAN FRANCISCO, CA 94111 Committee ID: 1285523	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$50,000.00	\$50,000.00	
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				

SUBTOTAL \$50,000.00

Schedule A Summary

1. Amount received this period - contributions of \$100 or more. (Include all Schedule A subtotals.)	\$50,000.00
2. Amount received this period - unitemized contributions of less than \$100	\$0.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.)	TOTAL \$50,000.00

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

FPPC Form 460 (JUNE/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule B – Part 1 Loans Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE B - PART 1

Statement covers period
from 04/01/2010
through 06/30/2010

CALIFORNIA FORM 460

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
REPAIR CALIFORNIA SPONSORED BY THE BAY AREA COUNCIL

I.D. NUMBER
1320515

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN		_____% RATE		CALENDAR YEAR PER ELECTION**
					DATE DUE		DATE INCURRED	
<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN		_____% RATE		CALENDAR YEAR PER ELECTION**
					DATE DUE		DATE INCURRED	
<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN		_____% RATE		CALENDAR YEAR PER ELECTION**
					DATE DUE		DATE INCURRED	

SUBTOTALS

Schedule B Summary

1. Loans received this period. _____
(Total Column (b) plus unitemized loans less than \$100.)
2. Loans paid or forgiven this period _____
(Total Column (c) plus loans under \$100 paid or forgiven.)
(Include loans paid by a third party that are also itemized on Schedule A.)
3. Net change this period. (Subtract Line 2 from Line 1.) _____ **Net** _____
Enter the net here and on the Summary Page, Column A, Line 2. (may be a negative number)

(Enter (e) on
Schedule E, Line 3)

* Amounts forgiven or paid by
another party also must be
reported on Schedule A.

** If required.

*Contributor Codes

IND-Individual COM-Recipient Committee (other than PTY or SCC) OTH-Other PTY-Political Party SCC-Small Contributor Committee

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule B - Part 2

Loan Guarantors

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE B - PART 2

Statement covers period from 04/01/2010 through 06/30/2010	CALIFORNIA FORM 460
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I.D. Number 1320515	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
REPAIR CALIFORNIA SPONSORED BY THE BAY AREA COUNCIL

FULL NAME, STREET ADDRESS AND ZIP CODE OF GUARANTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	LOAN	AMOUNT GUARANTEED THIS PERIOD	CUMULATIVE TO DATE	BALANCE OUTSTANDING TO DATE
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER DATE		CALENDAR YEAR PER ELECTION (IF REQUIRED)	
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER DATE		CALENDAR YEAR PER ELECTION (IF REQUIRED)	
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER DATE		CALENDAR YEAR PER ELECTION (IF REQUIRED)	
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER DATE		CALENDAR YEAR PER ELECTION (IF REQUIRED)	
SUBTOTAL					Enter on Summary Page, Line 17 only.	

Schedule C Nonmonetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE C

Statement covers period from <u>04/01/2010</u> through <u>06/30/2010</u>	CALIFORNIA FORM 460
Page <u>7</u> of <u>33</u>	I.D. Number 1320515

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
REPAIR CALIFORNIA SPONSORED BY THE BAY AREA COUNCIL

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL

Schedule C Summary

- Amount received this period - nonmonetary contributions of \$100 or more.
(Include all Schedule C subtotals.).....
- Amount received this period - unitemized nonmonetary contributions of less than \$100
- Total nonmonetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) **TOTAL**

*Contributor Codes
 IND - Individual
 COM- Recipient Committee
 (other than PTY or SCC)
 OTH - Other
 PTY - Political Party
 SCC - Small Contributor Committee

Schedule D

Summary of Expenditures

Supporting/Opposing Other

Candidates, Measures and Committees

Type or print in ink.
Amounts may be rounded
to whole dollars.

Statement covers period		SCHEDULE D	
from	04/01/2010	CALIFORNIA FORM 460	
through	06/30/2010	Page 8 of 33	
NAME OF FILER REPAIR CALIFORNIA SPONSORED BY THE BAY AREA COUNCIL		I.D. NUMBER 1320515	

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL					
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Schedule D Summary

- Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtotals.)
- Unitemized contributions and independent expenditures made this period of under \$100
- Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) **TOTAL**

Schedule E Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period		CALIFORNIA FORM 460
from 04/01/2010		
through 06/30/2010		Page 9 of 33
NAME OF FILER REPAIR CALIFORNIA SPONSORED BY THE BAY AREA COUNCIL		I.D. NUMBER 1320515

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
REPAIR CALIFORNIA SPONSORED BY THE BAY AREA COUNCIL

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger services	TSF transfer between committees of the same candidate/sponsor
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
CRAIGSLIST, INC. SAN FRANCISCO, CA 94122	OFC		\$400.00
CRAIGSLIST, INC. SAN FRANCISCO, CA 94122	OFC		\$125.00
BROOK FURNITURE RENTAL CHICAGO, IL 60674	OFC		\$425.96

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL

Schedule E Summary

1. Payments made this period of \$100 or more. (Include all Schedule E subtotals.)	\$70,329.13
2. Unitemized payments made this period of under \$100.	\$637.35
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	\$0.00
4. Total payments made this period. (Add lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	TOTAL \$70,966.48

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
from 04/01/2010		
through 06/30/2010		Page 10 of 33
NAME OF FILER REPAIR CALIFORNIA SPONSORED BY THE BAY AREA COUNCIL		I.D. NUMBER 1320515

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
REPAIR CALIFORNIA SPONSORED BY THE BAY AREA COUNCIL

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
SUTTON LAW FIRM SAN FRANCISCO, CA 94108	PRO		JAMES R. SUTTON, COMMITTEE TREASURER, IS OWNER OF PAYEE; JESSE MAINARDI, COMMITTEE ASSISTANT TREASURER, IS EMPLOYEE OF PAYEE.	\$7,372.14
CORISH ELECTRIC MILLBRAE, CA 94030	OFC			\$180.00
CORISH ELECTRIC MILLBRAE, CA 94030	OFC			\$1,090.00
R M PROPERTY MANAGEMENT RANCHO CORDOVA, CA 95742	OFC			\$527.50
I.S. LOGISTICS, INC. SAN FRANCISCO, CA 94103	OFC			\$487.06

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
from 04/01/2010		
through 06/30/2010		Page 11 of 33
NAME OF FILER REPAIR CALIFORNIA SPONSORED BY THE BAY AREA COUNCIL		I.D. NUMBER 1320515

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
REPAIR CALIFORNIA SPONSORED BY THE BAY AREA COUNCIL

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CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
ALTERNATIVE TECHNOLOGIES BERKELEY, CA 94710	OFC			\$187.50
ALTERNATIVE TECHNOLOGIES BERKELEY, CA 94710	OFC			\$1,464.58
ALTERNATIVE TECHNOLOGIES BERKELEY, CA 94710	OFC			\$742.75
PACIFIC GAS & ELECTRIC COMPANY SAN FRANCISCO, CA 94105	OFC			\$113.38
AT&T SACRAMENTO, CA 95887	OFC			\$1,207.90

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
from 04/01/2010		
through 06/30/2010		Page 12 of 33
NAME OF FILER REPAIR CALIFORNIA SPONSORED BY THE BAY AREA COUNCIL		I.D. NUMBER 1320515

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
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CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
AT&T SACRAMENTO, CA 95887	OFC			\$489.77
AT&T SACRAMENTO, CA 95887	OFC			\$627.32
AT&T SACRAMENTO, CA 95887	OFC			\$2,090.48
WILLIAM A. YEAGER VENICE, CA 90291	PET			\$1,668.50
KATHRYN DE CARLO OAKLAND, CA 94609			REIMBURSED EXPENSES	\$712.47

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
from 04/01/2010		
through 06/30/2010		Page 13 of 33
NAME OF FILER REPAIR CALIFORNIA SPONSORED BY THE BAY AREA COUNCIL		I.D. NUMBER 1320515

SEE INSTRUCTIONS ON REVERSE

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
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IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger services	TSF transfer between committees of the same candidate/sponsor
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
PACIFIC PRINT RESOURCES EMERYVILLE, CA 94608	PRT			\$243.07
SUTTON LAW FIRM SAN FRANCISCO, CA 94108	PRO		JAMES R. SUTTON, COMMITTEE TREASURER, IS OWNER OF PAYEE; JESSE MAINARDI, COMMITTEE ASSISTANT TREASURER, IS EMPLOYEE OF PAYEE.	\$12,950.26
SUTTON LAW FIRM SAN FRANCISCO, CA 94108	PRO		JAMES R. SUTTON, COMMITTEE TREASURER, IS OWNER OF PAYEE; JESSE MAINARDI, COMMITTEE ASSISTANT TREASURER, IS EMPLOYEE OF PAYEE.	\$17,004.74
COMPUTERIZED POLITICAL SERVICES, INC. SAN JOSE, CA 95131	OFC			\$5,000.00
DEMOCRATIC DIRECT, LLC SAN FRANCISCO, CA 94119	PET			\$5,000.00

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SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

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SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
from 04/01/2010		
through 06/30/2010		Page 14 of 33
NAME OF FILER REPAIR CALIFORNIA SPONSORED BY THE BAY AREA COUNCIL		I.D. NUMBER 1320515

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
REPAIR CALIFORNIA SPONSORED BY THE BAY AREA COUNCIL

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LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
STOREFRONT POLITICAL MEDIA SAN FRANCISCO, CA 94108	WEB			\$769.35
STOREFRONT POLITICAL MEDIA SAN FRANCISCO, CA 94108	WEB			\$1,211.10
STOREFRONT POLITICAL MEDIA SAN FRANCISCO, CA 94108	WEB			\$5,917.62
STOREFRONT POLITICAL MEDIA SAN FRANCISCO, CA 94108	CNS			\$164.13
STOREFRONT POLITICAL MEDIA SAN FRANCISCO, CA 94108	WEB			\$1,851.55

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SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

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SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	04/01/2010	
through 06/30/2010		Page 15 of 33
NAME OF FILER REPAIR CALIFORNIA SPONSORED BY THE BAY AREA COUNCIL		I.D. NUMBER 1320515

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
SUTTON LAW FIRM SAN FRANCISCO, CA 94108	PRO		JAMES R. SUTTON, COMMITTEE TREASURER, IS OWNER OF PAYEE; JESSE MAINARDI, COMMITTEE ASSISTANT TREASURER, IS EMPLOYEE OF PAYEE.	\$45.00
CORTNEY SELLS SACRAMENTO, CA 95834	SAL			\$100.00
AMBER JACKSON CITRUS HEIGHTS, CA 95661	SAL			\$160.00

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$70,329.13

Schedule F Accrued Expenses (Unpaid Bills)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE F

Statement covers period
from 04/01/2010
through 06/30/2010

CALIFORNIA
FORM 460

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
REPAIR CALIFORNIA SPONSORED BY THE BAY AREA COUNCIL

I.D. NUMBER
1320515

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I.S. LOGISTICS, INC. SAN FRANCISCO, CA 94103	OFC	\$487.06	\$0.00	\$487.06	\$0.00
COMPUTERIZED POLITICAL SERVICES, INC. SAN JOSE, CA 95131	OFC	\$9,500.00	\$0.00	\$5,000.00	\$4,500.00
PACIFIC PRINT RESOURCES EMERYVILLE, CA 94608	PRT	\$243.07	\$0.00	\$243.07	\$0.00

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SUBTOTALS

Schedule F Summary

- Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.)..... **INCURRED TOTALS** \$9,210.26
- Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.)..... **PAID TOTALS** \$70,516.18
- Net change this period. (**Subtract** Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.)..... **NET** (\$61,305.92)
May be a negative number.

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

Type or print in ink.
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Statement covers period
from 04/01/2010
through 06/30/2010

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NAME OF FILER
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I.D. NUMBER
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R M PROPERTY MANAGEMENT RANCHO CORDOVA, CA 95742	OFC	\$527.50	\$0.00	\$527.50	\$0.00
PACIFIC GAS & ELECTRIC COMPANY SAN FRANCISCO, CA 94105	OFC	\$113.38	\$0.00	\$113.38	\$0.00
ALTERNATIVE TECHNOLOGIES BERKELEY, CA 94710	OFC	\$187.50	\$0.00	\$187.50	\$0.00
AT&T SACRAMENTO, CA 95887	OFC	\$2,090.48	\$0.00	\$2,090.48	\$0.00

SUBTOTALS

Schedule F (Continuation Sheet) Accrued Expenses (Unpaid Bills)

Type or print in ink.
Amounts may be rounded
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Statement covers period
from 04/01/2010
through 06/30/2010

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NAME OF FILER
REPAIR CALIFORNIA SPONSORED BY THE BAY AREA COUNCIL

I.D. NUMBER
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LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, email)

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NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
AT&T SACRAMENTO, CA 95887	OFC	\$489.77	\$0.00	\$489.77	\$0.00
AT&T SACRAMENTO, CA 95887	OFC	\$627.32	\$0.00	\$627.32	\$0.00
AT&T SACRAMENTO, CA 95887	OFC	\$1,207.90	\$0.00	\$1,207.90	\$0.00
HANSONBRIDGETT SAN FRANCISCO, CA 94105	PRO	\$235.88	\$0.00	\$0.00	\$235.88

SUBTOTALS

Schedule F (Continuation Sheet) Accrued Expenses (Unpaid Bills)

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Statement covers period
from 04/01/2010
through 06/30/2010

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FORM **460**

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NAME OF FILER
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I.D. NUMBER
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SUTTON LAW FIRM SAN FRANCISCO, CA 94108	PRO JAMES R. SUTTON, COMMITTEE TREASURER, IS OWNER OF PAYEE; JESSE MAINARDI, COMMITTEE ASSISTANT TREASURER, IS	\$12,865.13	\$0.00	\$0.00	\$12,865.13
WILLIAM A. YEAGER VENICE, CA 90291	PET	\$1,668.50	\$0.00	\$1,668.50	\$0.00
DIRECT DEMOCRACY, LLC SCOTTSDALE, AZ 85254	PET	\$5,474.00	\$0.00	\$0.00	\$5,474.00
SUTTON LAW FIRM SAN FRANCISCO, CA 94108	PRO JAMES R. SUTTON, COMMITTEE TREASURER, IS OWNER OF PAYEE; JESSE MAINARDI, COMMITTEE ASSISTANT TREASURER, IS	\$9,604.89	\$0.00	\$0.00	\$9,604.89

SUBTOTALS

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

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Statement covers period
from 04/01/2010
through 06/30/2010

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ARIEL BOONE BERKELEY, CA 94704	SAL	\$160.00	\$0.00	\$0.00	\$160.00
FRANK CASTRO FRESNO, CA 93704	SAL	\$160.00	\$0.00	\$0.00	\$160.00
MATTHEW GRATZ WALNUT CREEK, CA 94597	SAL	\$840.00	\$0.00	\$0.00	\$840.00
MIGUEL MONTANEZ SACRAMENTO, CA 95823	SAL	\$167.50	\$0.00	\$0.00	\$167.50

SUBTOTALS

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

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Statement covers period
from 04/01/2010
through 06/30/2010

**CALIFORNIA
FORM 460**

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KAYLA OBLINGER SACRAMENTO, CA 95826	SAL	\$240.00	\$0.00	\$0.00	\$240.00
JESSIE RICHARDSON ESCONDIDO, CA 92027	SAL	\$290.00	\$0.00	\$0.00	\$290.00
RONALD SOTIROS FAIR OAKS, CA 95620	SAL	\$230.00	\$0.00	\$0.00	\$230.00
DEMOCRATIC DIRECT, LLC SAN FRANCISCO, CA 94119	TRS	\$112.98	\$0.00	\$0.00	\$112.98

SUBTOTALS

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

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Statement covers period
from 04/01/2010
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FORM 460**

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DEMOCRATIC DIRECT, LLC SAN FRANCISCO, CA 94119	PET	\$463.12	\$0.00	\$0.00	\$463.12
NGP SOFTWARE, INC. WASHINGTON, DC 20005	WEB	\$1,650.00	\$0.00	\$0.00	\$1,650.00
SUTTON LAW FIRM SAN FRANCISCO, CA 94108	PRO JAMES R. SUTTON, COMMITTEE TREASURER, IS OWNER OF PAYEE; JESSE MAINARDI, COMMITTEE ASSISTANT TREASURER, IS	\$0.00	\$5,930.88	\$0.00	\$5,930.88
BAY AREA COUNCIL SAN FRANCISCO, CA 94111	CNS, LIT, OFC, TRS	\$57,266.86	\$0.00	\$0.00	\$57,266.86

SUBTOTALS

Schedule F (Continuation Sheet) Accrued Expenses (Unpaid Bills)

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Statement covers period
from 04/01/2010
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FORM **460**

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NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
PACIFIC GAS & ELECTRIC COMPANY SAN FRANCISCO, CA 94105	OFC	\$0.00	\$165.34	\$0.00	\$165.34
SUTTON LAW FIRM SAN FRANCISCO, CA 94108	PRO JAMES R. SUTTON, COMMITTEE TREASURER, IS OWNER OF PAYEE; JESSE MAINARDI, COMMITTEE ASSISTANT TREASURER, IS	\$0.00	\$1,403.32	\$0.00	\$1,403.32
SUTTON LAW FIRM SAN FRANCISCO, CA 94108	PRO JAMES R. SUTTON, COMMITTEE TREASURER, IS OWNER OF PAYEE; JESSE MAINARDI, COMMITTEE ASSISTANT TREASURER, IS	\$0.00	\$1,571.75	\$0.00	\$1,571.75
SUTTON LAW FIRM SAN FRANCISCO, CA 94108	PRO JAMES R. SUTTON, COMMITTEE TREASURER, IS OWNER OF PAYEE; JESSE MAINARDI, COMMITTEE ASSISTANT TREASURER, IS	\$7,417.14	\$0.00	\$7,417.14	\$0.00

SUBTOTALS

Schedule F (Continuation Sheet) Accrued Expenses (Unpaid Bills)

Type or print in ink.
Amounts may be rounded
to whole dollars.

Statement covers period
from 04/01/2010
through 06/30/2010

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FORM **460**

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NAME OF FILER
REPAIR CALIFORNIA SPONSORED BY THE BAY AREA COUNCIL

I.D. NUMBER
1320515

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger services	TSF transfer between committees of the same candidate/sponsor
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, email)

*Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
CORISH ELECTRIC MILLBRAE, CA 94030	OFC	\$1,090.00	\$0.00	\$1,090.00	\$0.00
CLINTON REILLY COMMUNICATIONS SAN FRANCISCO, CA 94104	CNS CLINTON REILLY, COMMITTEE PRINCIPAL OFFICER, IS OWNER OF PAYEE.	\$15,000.00	\$0.00	\$0.00	\$15,000.00
BAY AREA COUNCIL SAN FRANCISCO, CA 94111	CNS, OFC, TRS	\$19,416.37	\$0.00	\$0.00	\$19,416.37
ALTERNATIVE TECHNOLOGIES BERKELEY, CA 94710	OFC	\$1,464.58	\$0.00	\$1,464.58	\$0.00

SUBTOTALS

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE F (CONT.)

Statement covers period
from 04/01/2010
through 06/30/2010

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FORM 460**

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NAME OF FILER
REPAIR CALIFORNIA SPONSORED BY THE BAY AREA COUNCIL

I.D. NUMBER
1320515

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger services	TSF transfer between committees of the same candidate/sponsor
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, email)

*Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
STOREFRONT POLITICAL MEDIA SAN FRANCISCO, CA 94108	CNS	\$7,500.00	\$0.00	\$164.13	\$7,335.87
CRAIGSLIST, INC. SAN FRANCISCO, CA 94122	OFC	\$125.00	\$0.00	\$125.00	\$0.00
SUTTON LAW FIRM SAN FRANCISCO, CA 94108	PRO JAMES R. SUTTON, COMMITTEE TREASURER, IS OWNER OF PAYEE; JESSE MAINARDI, COMMITTEE ASSISTANT TREASURER, IS	\$12,950.26	\$0.00	\$12,950.26	\$0.00
BAY AREA COUNCIL SAN FRANCISCO, CA 94111	SPONSOR EXPENSES FOR DEVELOPING AND PROMOTING BALLOT MEASURES; SEE SCHEDULE G.	\$44,681.66	\$0.00	\$0.00	\$44,681.66

SUBTOTALS

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

Type or print in ink.
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to whole dollars.

Statement covers period
from 04/01/2010
through 06/30/2010

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FORM 460**

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NAME OF FILER
REPAIR CALIFORNIA SPONSORED BY THE BAY AREA COUNCIL

I.D. NUMBER
1320515

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

*Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
BAY AREA COUNCIL SAN FRANCISCO, CA 94111	CNS, LIT, OFC, MTG, OFC, POS	\$6,775.46	\$0.00	\$0.00	\$6,775.46
BAY AREA COUNCIL SAN FRANCISCO, CA 94111	SPONSOR EXPENSES FOR DEVELOPING AND PROMOTING BALLOT MEASURES; SEE SCHEDULE G.	\$53,451.90	\$0.00	\$0.00	\$53,451.90
CRAIGSLIST, INC. SAN FRANCISCO, CA 94122	OFC	\$400.00	\$0.00	\$400.00	\$0.00
STOREFRONT POLITICAL MEDIA SAN FRANCISCO, CA 94108	WEB	\$1,211.10	\$0.00	\$1,211.10	\$0.00

SUBTOTALS

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

Type or print in ink.
Amounts may be rounded
to whole dollars.

Statement covers period
from 04/01/2010
through 06/30/2010

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NAME OF FILER
REPAIR CALIFORNIA SPONSORED BY THE BAY AREA COUNCIL

I.D. NUMBER
1320515

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

- | | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | MBR member communications | RAD radio airtime and production costs |
| CNS campaign consultants | MTG meetings and appearances | RFD returned contributions |
| CTB contribution (explain nonmonetary)* | OFC office expenses | SAL campaign workers' salaries |
| CVC civic donations | PET petition circulating | TEL t.v. or cable airtime and production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, email) |

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NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
STOREFRONT POLITICAL MEDIA SAN FRANCISCO, CA 94108	WEB	\$769.35	\$0.00	\$769.35	\$0.00
STOREFRONT POLITICAL MEDIA SAN FRANCISCO, CA 94108	WEB	\$5,917.62	\$0.00	\$5,917.62	\$0.00
CORISH ELECTRIC MILLBRAE, CA 94030	OFC	\$180.00	\$0.00	\$180.00	\$0.00
MERCHANTS EXCHANGE BUILDING SAN FRANCISCO, CA 94104	OFC CLINTON REILLY, COMMITTEE PRINCIPAL OFFICER, IS OWNER OF PAYEE.	\$1,408.33	\$0.00	\$0.00	\$1,408.33

SUBTOTALS

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

Type or print in ink.
Amounts may be rounded
to whole dollars.

Statement covers period
from 04/01/2010
through 06/30/2010

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FORM 460**

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NAME OF FILER
REPAIR CALIFORNIA SPONSORED BY THE BAY AREA COUNCIL

I.D. NUMBER
1320515

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
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*Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
MERCHANTS EXCHANGE BUILDING SAN FRANCISCO, CA 94104	OFC CLINTON REILLY, COMMITTEE PRINCIPAL OFFICER, IS OWNER OF PAYEE.	\$2,189.58	\$0.00	\$0.00	\$2,189.58
MERCHANTS EXCHANGE BUILDING SAN FRANCISCO, CA 94104	OFC CLINTON REILLY, COMMITTEE PRINCIPAL OFFICER, IS OWNER OF PAYEE.	\$2,970.83	\$0.00	\$0.00	\$2,970.83
JIM ROSS POLITICAL CONSULTING OAKLAND, CA 94612	CNS	\$10,000.00	\$0.00	\$0.00	\$10,000.00
DEMOCRATIC DIRECT, LLC SAN FRANCISCO, CA 94119	PET	\$10,000.00	\$0.00	\$5,000.00	\$5,000.00

SUBTOTALS

Schedule F (Continuation Sheet) Accrued Expenses (Unpaid Bills)

Type or print in ink.
Amounts may be rounded
to whole dollars.

Statement covers period
from 04/01/2010
through 06/30/2010

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FORM 460

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NAME OF FILER
REPAIR CALIFORNIA SPONSORED BY THE BAY AREA COUNCIL

I.D. NUMBER
1320515

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CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
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IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

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NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
KATHRYN DE CARLO OAKLAND, CA 94609	REIMBURSED EXPENSES	\$712.47	\$0.00	\$712.47	\$0.00
SUTTON LAW FIRM SAN FRANCISCO, CA 94108	PRO JAMES R. SUTTON, COMMITTEE TREASURER, IS OWNER OF PAYEE; JESSE MAINARDI, COMMITTEE ASSISTANT TREASURER, IS	\$19,844.99	\$0.00	\$17,004.74	\$2,840.25
STOREFRONT POLITICAL MEDIA SAN FRANCISCO, CA 94108	WEB	\$1,851.55	\$0.00	\$1,851.55	\$0.00
DEMOCRATIC DIRECT, LLC SAN FRANCISCO, CA 94119	REIMBURSED EXPENSES	\$2,533.42	\$0.00	\$0.00	\$2,533.42

SUBTOTALS

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

Type or print in ink.
Amounts may be rounded
to whole dollars.

Statement covers period
from 04/01/2010
through 06/30/2010

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NAME OF FILER
REPAIR CALIFORNIA SPONSORED BY THE BAY AREA COUNCIL

I.D. NUMBER
1320515

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

- | | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | MBR member communications | RAD radio airtime and production costs |
| CNS campaign consultants | MTG meetings and appearances | RFD returned contributions |
| CTB contribution (explain nonmonetary)* | OFC office expenses | SAL campaign workers' salaries |
| CVC civic donations | PET petition circulating | TEL t.v. or cable airtime and production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, email) |

*Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
BROOK FURNITURE RENTAL CHICAGO, IL 60674	OFC	\$425.96	\$0.00	\$425.96	\$0.00
ALTERNATIVE TECHNOLOGIES BERKELEY, CA 94710	OFC	\$742.75	\$0.00	\$742.75	\$0.00
SUBTOTALS		\$337,933.16	\$9,071.29	\$70,069.13	\$276,935.32

Schedule G

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE G

Statement covers period
from 04/01/2010
through 06/30/2010

CALIFORNIA
FORM **460**

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
REPAIR CALIFORNIA SPONSORED BY THE BAY AREA COUNCIL

I.D. NUMBER
1320515

NAME OF AGENT OR INDEPENDENT CONTRACTOR

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
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CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID

Attach additional information on appropriately labeled continuation sheets.

TOTAL*

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule H – Loans Made to Others*

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE H

Statement covers period from 04/01/2010 through 06/30/2010	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
REPAIR CALIFORNIA SPONSORED BY THE BAY AREA COUNCIL

I.D. NUMBER
1320515

FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT LOANED THIS PERIOD	(c) REPAYMENT OR FORGIVENESS THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST RECEIVED	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE LOANS TO DATE
				<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN		_____ % RATE		CALENDAR YEAR PER ELECTION**
					DATE DUE		DATE INCURRED	
				<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN		_____ % RATE		CALENDAR YEAR PER ELECTION**
					DATE DUE		DATE INCURRED	
*Loans that are contributions to another candidate or committee must also be summarized on Schedule D. Loans forgiven must also be reported on Schedule E.		SUBTOTALS						

(Enter (e) on
Schedule I, Line 3)

Schedule H Summary

- Loans made this period
(Total Column (b) plus unitemized loans less than \$100.)
- Payments received on loans
(Total Column (c) plus unitemized payments less than \$100.)
- Net change this period. (Subtract Line 2 from Line 1.)
(Enter the net here and on the Summary Page, Column A, Line 7.)

NET _____
(May be a negative number)

** If Required

Schedule I

Miscellaneous Increases to Cash

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE I

Statement covers period

from 04/01/2010

through 06/30/2010

CALIFORNIA
FORM **460**

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
REPAIR CALIFORNIA SPONSORED BY THE BAY AREA COUNCIL

I.D. NUMBER
1320515

DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$.00

Schedule I Summary

- Increases to cash of \$100 or more this period..... \$.00
- Unitemized increases to cash under \$100 this period..... \$.00
- Total of all interest received this period on loans made to others. (Schedule H, Column (e).)..... \$.00
- Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.)..... **TOTAL** \$.00

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC